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CONFIRMATION NO. 1085

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/499,322 08/29/2003 and is a CIP of 10/642,126 08/15/2003  
 which is a CON of 10/382,480 03/06/2003 ABN  
 which is a CON of 10/185,945 06/28/2002 ABN  
 which claims benefit of 60/301,698 06/28/2001  
 and is a CIP of 09/833,097 04/10/2001  
 which claims benefit of 60/221,173 07/27/2000  
 and claims benefit of 60/223,845 08/08/2000  
 and claims benefit of 60/258,969 12/29/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 01/07/2004

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> .17	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>				

**ADDRESS**

25181

**TITLE**

Processing transactions using a structured natural language

<b>FILING FEE RECEIVED</b> 460	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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